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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	
Filing Date	June 29, 2005
First Named Inventor	Mark Tawa
Title	Pharmaceutical Compositions...
Art Unit	
Examiner Name	
Attorney Docket Number	TPIP017D/WO US

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

34846

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☒ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

☐ Firm or
Individual Name

Address

City

State

Zip

Country

Telephone

Email

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Mark Tawa

Date

6/24/05

Name

Mark Tawa

Telephone

Title and Company

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 7 forms are submitted.

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SIGNATURE of Applicant or Assignee of Record

Signature

Date 6/24/05

Name

Julius Remenar

Telephone

Title and Company

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City

State

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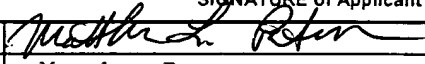
Email

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SIGNATURE of Applicant or Assignee of Record

Signature		Date	24 June 2005
Name	Matthew Peterson	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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SIGNATURE of Applicant or Assignee of Record

Signature

Date 28 June 05

Name

Orn Almarsson

Telephone

Title and Company

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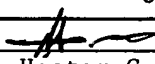
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SIGNATURE of Applicant or Assignee of Record

Signature		Date	6/27/05
Name	Hector Guzmán	Telephone	617-875-7488
Title and Company	Sr. Scientist, Transform Pharmaceuticals		

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SIGNATURE of Applicant or Assignee of Record

Signature

Date

Name

Hongming Chen

Telephone

Title and Company

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SIGNATURE of Applicant or Assignee of Record

Signature

Date 6/29/05

Name

Mark Oliveira

Telephone 202-254-7481

Title and Company

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**



Declaration
Submitted
With Initial
Filing

OR



Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket
Number

TPIP017D/WO US

First Named Inventor

Mark Tawa

COMPLETE IF KNOWN

Application Number

Filing Date

June 29, 2005

Art Unit

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PHARMACEUTICAL COMPOSITIONS WITH IMPROVED DISSOLUTION

(Title of the Invention)

the specification of which



is attached hereto

OR



was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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DECLARATION — Utility or Design Patent ApplicationDirect all correspondence to: ☒ The address associated with Customer Number: 34846 OR ☐ Correspondence address below

Name

Address

City

State

ZIP

Country

Telephone

Email

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Mark

Tawa

Inventor's Signature

Mark Tawa

Date

6/24/05

Residence: City

State

Country

Citizenship

West Roxbury

MA

USA

US

Mailing Address

16 Carol Circle

City

State

Zip

Country

West Roxbury

MA

02132

USA

NAME OF SECOND INVENTOR:

A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Julius

Remenar

Inventor's Signature

Date

Residence: City

State

Country

Citizenship

Framingham

MA

USA

US

Mailing Address

9 Eaton Road

City

State

Zip

Country

Framingham

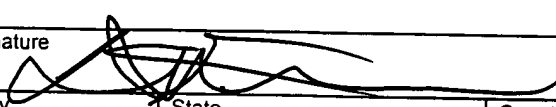

MA

01701

USA

Additional inventors or a legal representative are being named on the 26 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> The address associated with Customer Number:	34846	OR	<input type="checkbox"/> Correspondence address below
Name					
Address					
City		State		ZIP	
Country		Telephone		Email	
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NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])			Family Name or Surname		
Mark			Tawa		
Inventor's Signature					Date
Residence: City	State	Country	Citizenship		
West Roxbury	MA	USA	US		
Mailing Address					
16 Carol Circle					
City	State	Zip	Country		
West Roxbury	MA	02132	USA		
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])			Family Name or Surname		
Julius			Remenar		
Inventor's Signature					Date
					6/24/05
Residence: City	State	Country	Citizenship		
Framingham	MA	USA	US		
Mailing Address					
9 Eaton Road					
City	State	Zip	Country		
Framingham	MA	01701	USA		
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the  supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.					

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet <div style="text-align: right;"> Page <u>4</u> of <u>8</u> </div>
--------------------	---

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Matthew		Peterson	
Inventor's Signature		Date <u>24-JUNE-2007</u>	
Hopkinton Residence: City	MA State	USA Country	US Citizenship
25 Downey Street Mailing Address			
Hopkinton City	MA State	01748 Zip	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Orn		Almarsson	
Inventor's Signature		Date	
Shrewsbury Residence: City	MA State	USA Country	Iceland Citizenship
22 Farmington Drive Mailing Address			
Shrewsbury City	MA State	01545 Zip	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Hector		Guzman	
Inventor's Signature		Date	
Jamaica Plain Residence: City	MA State	USA Country	US Citizenship
47 Wyman Street Mailing Address			
Jamaica Plain City	MA State	02130 Zip	USA Country

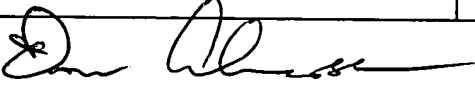
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DECLARATION**ADDITIONAL INVENTOR(S)**

Supplemental Sheet


Page 5 of 8

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Matthew		Peterson	
Inventor's Signature			Date
Hopkinton Residence: City	MA State	USA Country	US Citizenship
25 Downey Street Mailing Address			
Hopkinton City	MA State	01748 Zip	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Orn		Almarsson	
Inventor's Signature 			Date 28 June 05
Shrewsbury Residence: City	MA State	USA Country	Iceland Citizenship
22 Farmington Drive Mailing Address			
Shrewsbury City	MA State	01545 Zip	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Hector		Guzman	
Inventor's Signature			Date
Jamaica Plain Residence: City	MA State	USA Country	US Citizenship
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Jamaica Plain City	MA State	02130 Zip	USA Country

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DECLARATION**ADDITIONAL INVENTOR(S)**
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Given Name (first and middle (if any))		Family Name or Surname	
Hector		Guzman	
Inventor's Signature 			Date <u>6/29/05</u>
Jamaica Plain Residence: City	MA State	USA Country	US Citizenship
47 Wyman Street Mailing Address			
Jamaica Plain City	MA State	02130 Zip	USA Country

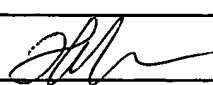
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Hongming		Chen	
Inventor's Signature 		Date 6/27/05	
Acton Residence: City	MA State	USA Country	US Citizenship
8 Sawmill Road Mailing Address			
Acton City	MA State	01720 Zip	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Mark		Oliveira	
Inventor's Signature		Date	
Framingham Residence: City	MA State	USA Country	US Citizenship
67 Nicholas Road, Apt. J Mailing Address			
Framingham City	MA State	01702 Zip	USA Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country

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DECLARATION**ADDITIONAL INVENTOR(S)**
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